COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

SECRETARY OF THE SENATE
2018 DEC 11 AM 11: 24

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Name of Traveler: Ryan Dherty
Employing Office/Committee: Chris Casas
Travel Expenses Paid by (List all sources): Council on Forces
Travel Date(s): 9/21/18
Description/Title of Attached Forms: Revise RE-2
·
Purpose of Amendment (describe the reason for amending original submission): Fixed date 1 2017 + 2018.
12/11/18
(Date) (Signature of Traveler)

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Date	/Time	e Star	np:	

Employee Post-Travel Disclosure of Travel Expenses

Post-Travel Filing Instructions: Complete this form within 30 days of returning from travel. Submit all forms to the Office of Public Records in 232 Hart Building.

travel. Submit all form	is to the Office of Pub	nic Records in 232 mai	T Bunding.		
In compliance with Rube reimbursed/paid for			sures with respect to	travel expenses that have been or	Wi
		rization (Form RE-1), <u>A</u> rtification Form with all		y, invitee list, etc.)	
Private Sponsor(s) (list	tall): Council on Fo	reign Relations	<u> </u>		
Travel date(s): 9/21/1					_
Name of accompanyin Relationship to Travel					
INCLUDE LODGING C	COSTS IN EMPLOYEE	EASE DUE TO THE ACC EXPENSES. (Attach addi		SE OR DEPENDENT CHILD, ONLY	7
Expenses for Employ	ee: Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)	
☐ Good Faith Estimate Actual Amount	\$445.00 Rail \$59.52 Bus	N/A	\$16.03		
Expenses for Accomp	oanying Spouse or De	pendent Child (if applie	cable):		
·	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)	
☐ Good Faith Estimate					
☐ Actual Amount					
Provide a description necessary.): Itinerary	of all meetings and ev	ents attended. See Sena	te Rule 35.2(c)(6). (A	Attach additional pages if	
0010/11/18	Doher	ty, Ryan		2	
(Date)	·	name of traveler)		(Signature of traveler)	
TO BE COMPLETE	D BY SUPERVISING	MEMBER/OFFICER:			
I have made a determination form, and	nation that the expense re necessary transporta	es set out above in connection, lodging, and relate	ections with travel des d expenses as defined	scribed in the Employee Pre-Travel in Rule 35.	el

(Revised 1/3/11)